

Substitute for Form PTO-875

1. Application or Docket Number

(Column 1)

(Colutor 2)

SMALL ENTITY

Of:

OTHER THAN
SMALL ENTITY

DATE	TIME
15	5
15	5
15	5
15	5
TOTAL	

MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))

* If the difference in column 1 is less than zero, enter "0" in column 2

(Column 1)

(Column 2).

(Column 3)

SMALL ENTITY

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OTHER THAN
SMALL ENTITY

RATE	ADDITIONAL FEE
x \$ ____ =	
x \$ ____ =	
+ \$ ____ =	
TOTAL ADDL FEE	

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.76(d))

RATE	ADDITIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL ADDITIONAL FEE	

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CR

CR

68

RATE	ADDITIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL ADDITIONAL FEE	

RATE	ADDITIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL ADD FEE	

CR

OR

OR

500

RATE	ADDITIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL ADDITIONAL FEE	

- If the entry in column 1 is less than the entry in column 2, write "0" in column 3
- If the "Highest Number" is 1, write "1" in column 3

* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number previously paid for in this space is less than 3, enter "3".

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-410-9199 and select option 2.